



TRANSMITTAL FORM

(To be used for all correspondence
after initial filing)

05-06-04

Express Mail No. EV335607806US

1653/11

Application Number	09/765,105
Filing Date	January 16, 2001
First Named Inventor	Donald S. Karanewsky
Art Unit	1653
Examiner Name	David Lukton
Attorney Docket No.	480140.442C1

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Additional Enclosure(s) (please identify below):
---	--	---

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	Emily W. Wagner Registration No. 50,922	Customer Number 00500
Signature		
Date	May 5, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	~ sent via Express Mail ~
Signature	Date:

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



FEET TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27.TOTAL AMOUNT OF PAYMENT (\$)**110.00**

Complete if Known	
Application Number	09/765,105
Filing Date	January 16, 2001
First Named Inventor	Donald S. Karanewsky
Examiner Name	David Lukton
Art Unit	1653
Attorney Docket No.	480140.442C1

METHOD OF PAYMENT					
<input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other					
<input type="checkbox"/> Deposit Account: Deposit Account Number: 19-1090 Deposit Account Name: Seed Intellectual Property Law Group PLLC					
The Director is authorized to (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any deficiencies to the above-identified deposit account.					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Fee Code	Fee Code	\$	\$		
1001	2001	770	385	Utility filing fee	
1002	2002	340	170	Design filing fee	
1003	2003	530	265	Plant filing fee	
1004	2004	770	385	Reissue filing fee	
1005	2005	160	80	Provisional filing fee	
SUBTOTAL (1)				(\$)	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims	130	-130**	= 0	Extra Claims	Fee from below
Independent Claims	1	-3	= 0	*	18
Multiple Dependent				*	86
				=	0
Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Fee Code	Fee Code	\$	\$		
1202	2202	18	9	Claims in excess of 20	
1201	2201	86	43	Independent claims in excess of 3	
1203	2203	290	145	Multiple dependent claim, if not paid	
1204	2204	86	43	** Reissue independent claims over original patent	
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$)	
** number previously paid					

FEE CALCULATION (continued)					
3. ADDITIONAL FEES					
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	2051	130	65	Surcharge - late filing fee or oath	
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet	
1053	2053	130	130	Non-English specification	
1812	2520	2520	1812	For filing a request for ex parte reexamination	
1804	1804	920*	920*	Requesting publication of SIR prior to Examiner action	
1805	1805	1840*	1840*	Requesting publication of SIR after Examiner action	
1251	2251	110	55	Extension for reply within first month	
1252	2252	420	210	Extension for reply within second month	
1253	2253	950	475	Extension for reply within third month	
1254	2254	1480	740	Extension for reply within fourth month	
1255	2255	2010	1005	Extension for reply within fifth month	
1401	2401	330	165	Notice of Appeal	
1402	2402	330	165	Filing a brief in support of an appeal	
1403	2403	290	145	Request for oral hearing	
1451	1451	1510	1510	Petition to institute a public use proceeding	
1452	2452	110	55	Petition to revive – unavoidable	
1453	2453	1330	665	Petition to revive – unintentional	
1501	2501	1330	665	Utility issue fee (or reissue)	
1502	2502	480	240	Design issue fee	
1503	2503	640	320	Plant issue fee	
1460	1460	130	130	Petitions to the Commissioner	
1807	1807	50	50	Processing fee under 37 CFR 1.17(q)	
1806	1806	180	180	Submission of Information Disclosure Stmt	
8021	8021	40	40	Recording each patent assignment per property (times number of properties)	
1809	2809	770	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	2810	770	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	2801	770	385	Request for Continued Examination (RCE)	
1802	1802	900	900	Request for expedited examination of a design application	
Other fee (specify) Terminal Disclaimer					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 110)	

SUBMITTED BY				Customer Number
Name (Print/Type)	Emily W. Wagner	Registration No. Attorney/Agent)	50,922	
Signature		Date	May 5, 2004	00500

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

O I P E JC26
MAY 05 2004
PATENT & TRADEMARK OFFICE

Express Mail No. EV335607806US
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Donald S. Karanewsky et al.
Application No. : 09/765,105
Filed : January 16, 2001
For : C-TERMINAL MODIFIED OXAMYL DIPEPTIDES AS
INHIBITORS OF THE ICE/CED-3 FAMILY OF CYSTEINE
PROTEASES

Examiner : David Lukton
Art Unit : 1653
Docket No. : 480140.442C1
Date : May 5, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Commissioner for Patents:

In response to the Office Action mailed February 12, 2004, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 22 of this paper.